AMENDMENTS TO THE SPECIFICATION:

At page 4, please delete the 2nd full paragraph and replace it with the following amended paragraph:

In the methods and compositions of the invention, the remyelinating agent may be an antibody, an immunologically active fragment of an antibody, a compound, or combinations thereof. The antibody or immunologically active fragment thereof is preferably natalizumab (~~Antegren~~® ANTEGREN®) or an immunologically active fragment thereof.

At page 7, please delete the last paragraph and replace it with the following amended paragraph:

Another aspect of the invention provides for a combination therapy comprising a therapeutically effective amount of a reyelinating agent and a therapeutically effective amount of an anti-inflammatory agent. Anti-inflammatory agents include but are not limited to an adrenocorticotropic hormone (ACTH), a corticosteroid (*e.g.*, prednisone, methylprednisolone, dexamethasone cortisol, cortisone, fludrocortisone, prednisolone, 6α-methylprednisolone, triamcinolone, and betamethasone), an interferon (*e.g.*, interferon beta-1b and interferon beta-1a), ~~Copaxone~~® COPAXONE®, or a nonsteroidal anti-inflammatory drug (*e.g.*, aspirin, a sodium salicylate, choline magnesium trisalicylate, salsalate, diflunisal, sulfasalazine, olsalazine, a para-aminophenol derivatives, an indole, an indene acetic acid, a heteroaryl acetic acid, an anthranilic acid, an enolic acid, an alkanones, a diaryl-substituted furanone, a diaryl-substituted pyrazoles, an indole acetic acids, and a sulfonanilide). The remyelinating agent can be selected from any of the compounds of formula I, IA, IB, IC, II, IIA, or IIB. Alternatively, the remyelinating agent can be an antibody against VLA-4 or an immunologically active fragment thereof or a polypeptide which binds to VLA-4 thereby preventing it from binding to a cognate ligand.

At page 29, please delete the 2nd full paragraph and replace it with the following amended paragraph:

By "natalizumab" or "~~Antegren~~® ANTEGREN®" is meant a humanized antibody against VLA-4 as described in commonly owned U.S. Patent Nos. 5,840,299 and 6,033,665, which are herein incorporated by reference in their entirety. Also contemplated herein are

other VLA-4 specific antibodies. Such remyelinating antibodies and immunoglobulins include but are not limited to those immunoglobulins described in U.S. Patent Nos. 6,602,503 and 6,551,593, published U.S. Application No. 20020197233 (Relton *et al.*), and as further discussed herein.

At page 37, please delete the last full paragraph and replace it with the following amended paragraph:

Newer therapies for MS include treating the patient with interferon beta-1b, interferon beta-1a, and ~~Copaxone®~~ COPAXONE® (formerly known as copolymer 1). These three drugs have been shown to significantly reduce the relapse rate of the disease. These drugs are self-administered intramuscularly or subcutaneously.

At page 209, please delete the last full paragraph and replace it with the following amended paragraph:

By "antibodies" is meant to include complete immunoglobulins such as IgG1 (or any IgG subclass) or IgM, or inhibitors derived from antibodies, such as natalizumab (~~Antegren®~~ ANTEGREN®).

At page 254, please delete the penultimate paragraph and replace it with the following amended paragraph:

Other agents utilized to treat, ameliorate or palliate symptoms associated with demyelination conditions or diseases, including multiple sclerosis, include but are not limited to: muscle relaxants (*e.g.*, diazepam, cyclobenzaprine, clonazepam, clonidine, primidone, and the like), anticholinergics (*e.g.*, propantheline, dicyclomine, and the like), central nervous system stimulants (*e.g.*, pemoline), non-steroidal anti-inflammatory agents (NSAIDs such as ibuprofen, naproxen and ketoprofen), interferons, immune globulin, glatiramer (~~Copaxone®~~ COPAXONE®), mitoxantrone (~~Novantrone®~~ NOVANTRONE®), misoprostol, tumor necrosis factor-alpha inhibitors (*e.g.*, pirfenidone, infliximab and the like) and corticosteroids (*e.g.*, glucocorticoids and mineralocorticoids).

At page 254, please delete the last paragraph and replace it with the following amended paragraph:

Common agents for treating multiple sclerosis include interferon beta-1b (~~Betaseron®~~ BETASERON®), interferon beta-1a (~~Avonex®~~ AVONEX®) high-dose interferon beta-1a (~~Rebif®~~ REBIF®), glatiramer (~~Copaxone®~~ COPAXONE®), immune globulin, mitoxantrone (~~Novantrone®~~ NOVANTRONE®), corticosteroids (*e.g.*, prednisone, methylprednisolone, dexamethasone and the like). Other corticosteroids may also be used and include but are not limited to cortisol, cortisone, fludrocortisone, prednisolone, 6α-methylprednisolone, triamcinolone, and betamethasone.

Please delete the paragraph bridging pages 255 and 256 and replace it with the following amended paragraph:

Glatiramer acetate (GA,~~-Copaxone®~~ COPAXONE®) is a synthetic molecule that inhibits activation of myelin basic protein-reactive T cells and induces a T-cell repertoire characterized by anti-inflammatory effects. Moreover, glatiramer can access the central nervous system (CNS), whereas interferon-beta cannot (Dhib-Jalbut, 2002 *Neurology* 58: S3-9; Weinstock-Guttman *et al.*, 2000 *Drugs* 59: 401-10).